

Procedure Number 2-6-26

Revised: 01-18-24
New Issue: 09-01-09

SUBJECT: Critical Incident Procedure

PURPOSE: To establish a procedure which maintains a consistent process for the identification, reporting, analysis and prevention of incidents involving the individuals that Woodhaven supports.
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Staff will record all incidents on the Therap GER (General Event Report) attached to the back of this procedure.

Staff will be responsible to complete the GER for the following situations:

1. All events where there is a report, allegation or suspicion that a consumer has been subjected to:
 - Misuse of Consumer Funds/Property
 - Neglect
 - Physical or Verbal Abuse
 - Sexual Abuse

2. All Health Events:
 - Emergency Room Visits
 - Non-Scheduled Hospitalization
 - Death of individual supported
 - Medication Errors of any kind from minimal, moderate to serious
 - Choking
 - Falls

3. Use of Emergency Procedure with a consumer
 - Any restraint used on an individual that restricts their freedom of movement, physical activity or normal access.

4. Any event where there is Law Enforcement involvement when the consumer is either the victim, alleged perpetrator or when law enforcement is called in support of the event.

5. All events of fire, theft, or natural disaster resulting in the disruption of service to the individual supported.

6. All events involving a consumer where there is a realistic threat of:
 - Consumer Self-Harm (if it results in an injury or is not being tracked as part of a behavior plan)
 - Physical aggression/Assault

7. All events where there is sexual conduct involving an individual supported and it is alleged, suspected or reported that one of the parties is not a consenting participant.

8. All events where the individual supported ingests a non-food item.

9. All events which result in a need for an individual supported to receive lifesaving intervention or medical/psychiatric emergency intervention.

10. Elopement- when absence raises reasonable concern for the safety of the consumer or the consumer will not return.

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Documentation of any reportable incident must be completed as soon as possible after an incident. Any failure to report an incident in the required time frame could result in disciplinary action against the employee by the agency. DMH has the authority to apply administrative or disciplinary sanctions to the agency due to failure to report or delinquent reporting. The Home Coordinator/Community Connections Coordinator needs to be contacted any time a GER is completed. Staff should always err on the side of caution if they are unsure if a GER should be completed and complete one. Program Managers will determine if a GER needs to be entered into the CIMOR State database as an EMT. Each form is detailed in explanation of what needs to be completed. Staff need to ensure that they complete each box that is applicable and write legible.

Program Managers are required to review the GER and indicate the immediate action taken by the agency and any action steps needed to prevent a reoccurrence. Program Managers are required to notify the Director of Programs immediately and complete and submit an EMT into CIMOR for the below-listed events. Critical incidents include the following and they warrant an immediate call to Boone County Family Resources and DMH by the Director of Programs or designee:

- Alleged/Suspected Abuse, Neglect or Misuse of Consumer/Funds Property
- Death
- Criminal Activity Involving a consumer, either as a victim or perpetrator
- Elopement
- Significant unanticipated deterioration in a consumer’s physical or mental condition

Program Managers are required to enter an EMT for a Critical Incident into CIMOR State database the same day it occurs or before the end of the following business day if it occurs after business hours or on a holiday or weekend. A verbal notification must be made immediately to the on-call contact at BCFR and CMRO during off hours.

The Director of Programs will review the GER for appropriateness of agency response.

The following items are tracked internally by the agency on the GER, but are not required to be entered into CIMOR. These include:

- Property Destruction
- Threats of Suicide
- Vehicle Accident
- Injuries
- Use of a PRN psychotropic medication
- Use or possession of a weapon
- Unauthorized use and possession of legal or illegal substances

The data for all GER’s available on Therap are sent to the Program Team (which includes Chief Operating Officer, Director of Programs, Director of Quality Assurance, and the Program Managers) for review each quarter. They each analyze the data by home & program and by individuals to look at trends that are occurring within a home or day program, for specific individuals or with a staff member. The Health and Safety Committee also looks at critical incidents on a quarterly basis. An annual report is done that tracks critical incidents within the agency and reviews trends and reviews the effectiveness of improvements to reduce risk.

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One or more of the following individuals will conduct a debriefing process after each critical incident: The Program Team, COO, Director of Programs, Director of Quality Assurance and Registered Nurse assigned to home.

Approved: _____
Director of Residential & Community Services

Date: _____

Attachments: Community Event Form